

# WASHINGTON COUNTY EMPLOYEE EMERGENCY INFORMATION

**Full Name:** \_\_\_\_\_

**Nick Name:** \_\_\_\_\_

**Street Address:**

**Mailing Address:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**City**                      **State/Zip Code**

\_\_\_\_\_  
**City**                      **State/Zip Code**

**Home Phone #:** \_\_\_\_\_ **Cellular Phone #:** \_\_\_\_\_

**Department:** \_\_\_\_\_ **Title:** \_\_\_\_\_

## **NOTIFY IN CASE OF EMERGENCY:** (please list two people)

**Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Cellular Phone #:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Cellular Phone #:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_